U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 17047			2. Fiscal Year Covered From
	. ,		1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.			4. Name, file number, and address of labor organization.
Name	Joseph	Bratina	Name Sheet Metal Workers Local 219 Labor Organization File Number 000-073
P.O. Box, Bldg., Room No., if any			P.O. Box, Building and Rcom Number, if any
Street	3316 Publishers	Drive	Street 3316 Publishers Drive
City	Rockford		City Rockford
State	Illinois	ZIP Code + 4 61109-631	8 State Illinois ZIP Code + 4 61109 - 63
5. Positio	on in labor organization. Ret	irement fund tru	ustee

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seaking to represent.					
6. Name and address of Employer (including t	rade namo, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name					
Trade Name, if any:					
P.O. Box, Bidg., Room No., if any					
		7.b. Amount.			
Street					
City					
State	ZIP Coda + 4				

Signature

15. Signature and verification. The undersigned declarss, under penalty of Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Dy H Bustin

on 7-22-04

815-874-6641

Date Telephone Number

Form LM-30 (2003)

NOTE: This represents my good faith effort to reconstruct the reportable occurrences for the period Jan 1, 2004-Dec 31, 2004. I do not, to the best of my knowldge, any LM-30 reportable transactions. I am filing this form in order to qualify as part of the DOL amnesty filing for 2004 and the prior five years.